

CHARGES AND SPECIFICATIONS

PD468-121 (Rev.1-02)-Pent

September 9, 2016

Command	Serial No.	I.A.B. Log No.	I.A.B.Member Notified	Department Advocate's Office Serial Number
046 PCT / 046	CCRB No. 201508892	2016-32104	Sgl. Macari	2016-16298

TO THE POLICE COMMISSIONER:

	Rank-Title	Surname	First Name	МІ	Shield No.	Tax Reg. No.	
hereby CHARGE	POM	Newman	Jacob	В	19914	933090	
Squad or Chart No	Command				Date Entered Dept.		
	046 PCT / 046					7/1/2003	

with VIOLATION OF DEPARTMENT REGULATIONS

SPECIFICATIONS

in that:

1. Police Officer Jacob Newman, on or about September 1, 2014, at approximately 0526 hours, while assigned to the 46th Precinct and on duty, in the vicinity of S87(2)(6)

Bronx County, wrongfully used force, in that he struck S87(2)(6)

with a baton without police necessity.

203-11 - Use of Force

PL § 120.05(2), PL § 120.00(1)

Nicole S. Junior

Deputy Chief Prosecuto

New York City Civilian Complaint Review Board

Date 1

1st ENDORSEMENT

Executive Director Mina Malik of the Civilian Complaint Review Board to the Police Commissioner, September 9, 2016. I concur with the issuance of charges and specifications.

Mina Malik

Executive Director

New York City Civilian Complaint Review Board

INSTRUCTIONS FOR SERVICE OF CHARGES AND SPECIFICATIONS

- 1. Respondent will sign and complete where appropriate:
 - a. original charges and specifications
 - b. vacation and military leave form
 - c. two (2) copies of instructions and receipt of charges and specifications
 - d. agreement to accept service of notice form (when requested in suspension cases only).
- 2. Respondent will receive:
 - a. one (1) copy of charges and specifications
 - b. one (1) copy of instructions and receipt of charges and specifications form

ACKNOWLEDGEMENT OF SERVICE

I acknowledge due personal serv	ice on me of the within Charges a	and Specifications	and notice of Hearing, this
day of	, 20	at	AM/PM.

Instructions: After all specifications are entered, list witnesses for the department. (If witness is civilian, enter name and address on Official Letterhead PD 158-151). If member of the force, give rank, name, shield number and command. Also indicate scheduled vacation (if any), chart, Squad no., or working schedule of complainant, respondent and witnesses (if member of the department).

RESPONDENT

(Rank/Title) (Signature) (Rank/Title) (Signature)

DATESTAMP

D.A.O. CMD PREFER C&S HIGHER COMMAND D.A.O.

(Out) (in) (Out) (in) (Out) (in)